

Substitute for Form PTO-875

10/82142

(Column 2)

RATE (\$)		FEE (\$)
X	=	
X	=	
TOTAL		

APPLICATION AS AMENDED – PART II

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RATE (\$)	ADDITIONAL FEE (\$)
x 50 ⁰⁰ =	
x 200 ⁰⁰ =	
TOTAL	
ADD'L FEE	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

RATE (\$)		ADDITIONAL FEE (\$)
X	=	
X	=	
TOTAL ADD'L FEE		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.